



## **ONEprop Notice to Vacate Form**

Your lease requires you provide a written notification of your intent to move **45 days prior to the end of your lease term**. Please fill out all the information on this form in order to protect your interests and ensure you have provided proper notification. The Notice to Vacate Form must be signed by everyone named on the lease. You may send to us via email ([pmsupport@oneprop.com](mailto:pmsupport@oneprop.com)) or fax to our offices (#866.841.9299). If you have questions on completing this form please call your property manager. Once you submit your **Notice to Vacate Form**, please be sure to confirm with your property manager that it has been received. Also, within few days after the Notice to Vacate has been processed, the designated Marketing Agent for the area will contact you to schedule a time to visit the home, take marketing photos and explain the marketing process.

Please review the **move out instructions** at the ONEprop web site ([http://www.onepropdfw.com/move\\_out\\_instructions.html](http://www.onepropdfw.com/move_out_instructions.html)). Tenants who fulfilled the contract terms of their lease and followed the instructions on leaving the property, have the best opportunity for a full refund of the security deposit.

Information on the lease property you are leaving:

Street Address: \_\_\_\_\_

City, State & Zip Code: \_\_\_\_\_

Current Phone Number: \_\_\_\_\_

Scheduled End of Lease: \_\_\_\_\_

Scheduled Date of Surrender: \_\_\_\_\_

It is important that we have a current phone number for you in case we need to reach you during the next few months as you prepare to move out. You will have surrendered the property when you have removed your personal goods and returned all access devices to ONEprop, Inc. Please call our office if circumstances allow you an early departure. There may be penalties if you abandon the property early without notifying ONEprop, Inc.

This form should be signed by all residents included on the lease. Please sign in the space provided below. Remember we must receive this signed document in our office 45 days prior to the end of your lease term regardless of the date you sign this form otherwise you may be liable for an additional month's rent.

	PRINT NAME	SIGN NAME
Resident # 1:	_____	_____
Resident #2:	_____	_____
Resident #3:	_____	_____
Resident #4:	_____	_____

### **Forwarding Address Information – Signature Required**

Street Address: \_\_\_\_\_

City, State & Zip Code: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_